

## TREE REMOVAL PERMIT APPLICATION

## **BUILDING and NEIGHBORHOOD SERVICES**

615-794-7012 Office 615-591-9066 Fax

GENERAL INFORMATION		
Subdivision:	Lot #: Buil	ding Permit #:
Project Address:		Suite/Unit #:
Project Name:	Residential:	Commercial:
Property Owner:		
Property Owner's Phone Number:		
CONTRACTOR INFORMATION		
Contractor:		
Street Address:		
City: State: Zip:	E-mail:	
Office phone: Cell Phone:		Fax:
TREE REMOVAL DETAILS		
Removal Date:		
Approximate Number of Trees to be Cut:		
Approximate Number of Caliper Inches to be Cut:		
Largest Tree Caliper:		
Signature:	Date:	

**Note:** Contact Lori Jarosz (<u>lori.jarosz @franklintn.gov</u>) or 615.550.6728 at for confirmation of address assignment. Incorrect or incomplete information may result in permit revocation. Tree removal permit not required for parcels less than one acre.